

lobular consolidations and peribronchiolar nodular lesions. The density of some of the interlobular and larger septa indicates that the lobular lesions occurred early and that the infection drained back along the lymphatics and then spread out from the bronchi or peribronchial tissues. The confluent area in the lower lobe near the base and interlobar pleura appears to have spread out about several small bronchi. This is possibly the focus, the drainage of which is responsible for the lymphangitis about the bronchus just above it which, in turn, is surrounded by a beginning consolidation. Microscopically, this bronchus showed a phlegmon of the surrounding tissues with little change of the mucosa. Accession number 3078, Army Medical Museum. Negative number 30725